Entered - 03-05-99 - sb CL 99L0137- GWENDOLYN BURNS

CLAIM OF: LENBROOK SQUARE

3747 Peachtree Road, NE Atlanta, Georgia 30319 01- R-1553

For property damages alleged to have been sustained as a result of a sewer back up at 3580 Piedmont Road, NE on February 16, 1999.

THIS ADVERSED REPORT IS

/

APPROVED

BY:

ROSALIND RUBENS NEWELL DEPUTY CITY ATTORNEY

C-33

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0137		Date:	September 12, 2	2001
,				
Claimant /VictimLl				
BY: (Atty) (Ins. Co.)		0210		
Address: 3747 Peachtree R	Coad, NE, Atlanta, Georgia 30	0319	- 4:1 Ti C	
Subrogation: Claim	for Property damage 5 United	specified B	odily injury \$	
Date of Notice: 2/25/99	Method: Writte	en, Proper A	impro	per
Conforms to Notice: O.C.G.A. Date of Occurrence 2/16/9 DepartmentPUBLIC WORK	§36-33-5	Ante Liter	n (0 Mo.)	· · · · · · · · · · · · · · · · · · ·
Date of Occurrence 2/16/9	Place:	Operations	, INE	
Department PUBLIC WORK	.S Division Sewer	Disciplinant Action:		
Employee involved		_ Disciplinary Action		· · · · · · · · · · · · · · · · · · ·
NATURE OF CLAIM: Cl	aiment alleges that it sustains	ed property damages fi	rom a sewer hack i	in An investigation
determined that the City respon	anniant aneges that it sustained	manner and found are	ase denosits in clain	nant's service lateral
line. The service lateral line wa	es cleared and the mainline wa	s degreased. Furthermo	re the mainline was	s inspected and there
was nothing found in the line th	ast could have caused or encou	raged a grease blockag	e Lastly the inves	tigation showed that
the grease blockage resulted fr	om grease entering the system	n from the cafeteria lo	cated on claimant's	property which is a
violation of the City's grease or	dinance (Atlanta City Code & 1	54-297). The operation	of the City sewer sy	stem is a government
function and the City is immun	e from liability as set forth in	O.C.G.A.§ 36-33-1.		
Tunction and the City is minute	O Month Madritty as set form the	<u> </u>		
INVESTIGATION:				
Statements: City employee _	X Claimant	Others	Written	Oral X
Pictures Diagrams	Reports: Police	Dept Repo	rt X	Other X
Traffic citations issued: City I		Claimant Driver_		
Citation disposition: City Dri	ver	Claimant Driver		
BASIS OF RECOMMENDA	ATION:			
Function: Governmental Improper Notice	X	_ Ministerial		
Improper Notice	More than Six Months	Other X	Damages reason:	able
City not involved	Offer rejected	d Com	promise settlement	
Repair/replacement by Ins. Co	ı	Repair/replacement	by City Forces	
Repair/replacement by Ins. Co Claimant Negligent	City Negligent	Joint	_ Claim Abandone	d
		Respectfully subn	nitted,	
		$\sim \mathcal{H}$	1 /	$\boldsymbol{\mathcal{Z}}$
		Muga	111-1	2-
		Nuca	eur ju	27.77.10
		INVESTIGATOR	-GWBNDOLYN	BURNS
RECOMMENDATION:	\sim			
	(.)		0101	21101
Pay \$	Adverse X A	ccount charged: 1A01		2H01
Claims Manager:	Little all		09-14-01	*
Committee Action:		Council Action		

FORM 23-61

				•	BURNS
COUNCIL OF THE C	rome of a Tri a Nil		RE: CLAIM FOR	DAMAGES	03/04/99
COUNCIL OF THE C MUNICIPAL CLERK	ITY OF ATLANT	LA Sections	RE. CERIM FOR	DAMAGES	
City Hall	*				18/99
55 Trinity Avenue, S.V		FEB 2.5	Tod	lay's Date:	18/11
Adanta, Georgia 30335	5		ENTERED - 3-5-	-99 - SB	
			99L0137 - GWEN	I_BURNS	
Dear Municipal Clerk:	-		السيدية		
Deat Mannethan Cleak.	•				AT THIS TIME
This is to notify the Cit \$_\times_A boo	ly of Atlanta that lily injury for wh	I have suffered dam ich I contend the City	ages in the amount sum of y is liable.	S UNKNOWN	property and /or
-					X
1. Date of incident:	EPENNING 16	2. Time 0	f Incident: 0730 AM	3. Police called:	·
4. Location of incident	t (including street	address) : 3747	Peachtree Rond	UE, ARAWI	TA, GA 30319
5. Name of your insur	ance company: 🔟	HARTFORD, IN	SURANCE CO Poli	icy No. <u>42 <i>UU</i></u>	V BG0 949 W
6. State what and how	incident occurre	d: City of A:	tLANTA SCUCA 5/00	KnGE CAUS	ed extensive
WATER dumad	re to Admi	NISTRATIUE (15T	Floor) And Basem	ent levels	of Senior
CITIZEN RETT	REMENT CON	MUNITY 04 1	TRIVE OF BACKS	OP CAUSE	d by blockAbe
					•
8. The registered own	er must make the	claim for vehicle dar	RESULT IN CRIMINAL nages, complete the followi e current tag receipt or titl	ing and attach tw	
Your vehicle:					
	(Make)	(Year)	(Tag Number)	(Driv	er's Name)
City vehicle:		(0)			
	(Make)	(City Drive	r's Name)	(Departme	ent/Bureau)
9. Witness:					
	(Name)		(Address)	(Telepho	ne Number)
	•		,	((
			sovereign immunity of the he City of Atlanta and / or		as granted by
11 This claim should b		ام ممسطر فر مرحد مرحد مراد م	h		
11. This claim should t	e maneu muneur	itely to the address s			
I HEREBY SWEA	R OR AFFIRM	THAT THE ABOVE	Henbrook	- Square	
INFORMATION			(1	Square Print Claimant's	Name)
Suhard	7 (Justi	-	2747 De	achtree Ro	AIR
Signature of Clain			3747 76		AR NE
Signature of Clain	nant A dans	1 to 46		(Address)	*
Assethi	JAWM	veria.	ATRANT	A GERRY	a 30319
			·	ty, State and Zip	Code)
			,		Code
A4 <i>D</i>	1552		(404) 233-300	0	
01- <i>P</i> -	1000		(Work Numb	er) (Home Number)